ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sharon	68903	012900
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		70008	3/2/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N		Non-elected
=	Allowed	I		Interference
– (Through numeral)	Canceled	A		Appeal
÷	Restricted	O		Objected

Claim		Date		Claim		Date		Claim		Date
Final	Original			Final	Original			Final	Original	
	1			19	51				101	
	2			20	52				102	
	3			21	53				103	
	4			22	54				104	
	5			23	55				105	
	6			24	56				106	
	7			25	57				107	
	8			26	58				108	
	9			27	59				109	
	10			28	60				110	
	11			29	61				111	
	12			30	62				112	
	13			31	63				113	
	14			32	64				114	
	15			33	65				115	
	16			34	66				116	
	17			35	67				117	
	18			36	68				118	
	19			37	69				119	
	20			38	70				120	
	21			39	71				121	
	22			40	72				122	
	23			41	73				123	
	24			42	74				124	
	25			43	75				125	
	26			44	76				126	
	27			45	77				127	
	28			46	78				128	
	29			47	79				129	
	30			48	80				130	
	31			49	81				131	
	32			50	82				132	
1	33			51	83				133	
2	34			52	84				134	
3	35			53	85				135	
4	36			54	86				136	
5	37			55	87				137	
6	38				88				138	
7	39				89				139	
8	40				90				140	
9	41				91				141	
10	42				92				142	
11	43				93				143	
12	44				94				144	
13	45				95				145	
14	46				96				146	
15	47				97				147	
16	48				98				148	
17	49				99				149	
18	50				100				150	

If more than 150 claims or 10 actions
staple additional sheet here

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